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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average burden							
hours per respo	onse 16.00						

SEC USE ONLY						
Prefix		Serial				
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Preferred Stock Offering								
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE								
Type of Filing: ☐ New Filing ☐ Amendment	Moran Andrews							
A. BASIC IDENTIFICATION DATA	187 Secures Vol							
1. Enter the information requested about the issuer								
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) English, baby!, Inc.	MAY 2 7 2003							
Address of Executive Offices (Number and Street, City, State, Zip Code) 1120 NW 14 th Avenue, Portland, OR 97209	Telephone Number (Including Area Code) (503) 827-8021							
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)							
Brief Description of Business On-line English as a second language education								
Type of Business Organization								
⊠ corporation ☐ limited partnership, already formed ☐ other ☐ business trust ☐ limited partnership, to be formed	er (please specify): PROCESSED							
Actual or Estimated Date of Incorporation or Organization: Month Year								

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 6

SEC 1972 (6-02)

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ☑ Beneficial Owner Check Box(es) that Apply: □ Director □ ☐ General and/or Managing Partner Full Name (Last name first, if individual) Hayden, John Business or Residence Address (Number and Street, City, State, Zip Code) 1120 NW 14th Avenue, Portland, OR 97204 Check Box(es) that Apply: □ Promoter ⊠ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) McKelvey, Miguel Business or Residence Address (Number and Street, City, State, Zip Code) 1120 NW 14th Avenue, Portland, OR 97204 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Hirko Family Trust Business or Residence Address (Number and Street, City, State, Zip Code) 16915 NW Brugger Rd., Portland, OR 97229 Check Box(es) that Apply: ⊠ Beneficial Owner ☐ Executive Officer □ Director ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Insight Development Group LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1800 Blankenship Road, Suite 200, West Linn, OR 97068 Check Box(es) that Apply: ☐ Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Miller, Fred Business or Residence Address (Number and Street, City, State, Zip Code) 121 SW Salmon Street, Portland, OR 97204 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: □ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			

				В.	INFORMA	ATION AE	OUT OFF	ERING					
1.	Has the issu	er sold, or d	loes the issu	ier intend to	o sell, to no	n-accredite	ed investors	in this offe	ering?			Yes ⊠	No
		ŕ			•		2, if filing i		Ū				_
2.	What is the	ninimum ir	vestment th	nat will be a	accepted fro	om any indi	ividual?				•••••	\$	N/A
												Yes	No
3.	Does the off	٠.	•	•	_								
4.	Enter the in commission If a person t or states, list a broker or d	or similar in be listed in the name of	remunerations an associ	on for solic ated persor er or dealer	itation of p or agent of If more t	urchasers i of a broker than five (5	n connection or dealer response to	on with sale egistered wo o be listed	es of securi	ties in the and/or wit	offering. h a state		
Full N N/A	ame (Last na	ne first, if i	ndividual)					· · ·					<u></u>
Busine N/A	ess or Resider	ice Address	(Number a	and Street, (City, State,	Zip Code)							
Name N/A	of Associated	l Broker or	Dealer										
States	in Which Per	son Listed l	Has Solicite	ed or Intend	ls to Solicit	Purchasers	3						
(Ch	eck "All Stat	es" or checl	k individual	States)								. 🗆 All S	States
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	-
[IL] [MT]		[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	_
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	ame (Last nar	ne first, if i	ndividual)	· ·									
Busine N/A	ess or Resider	ce Address	(Number a	nd Street, (City, State,	Zip Code)							
Name (of Associated	Broker or	Dealer										
States	in Which Per	son Listed I	Has Solicite	d or Intend	s to Solicit	Purchasers							
(Ch	eck "All Stat	es" or checl	c individual	States)								□ All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[AM]	[MI]	[MN]	[MS]	[MO]	
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Full Na N/A	ame (Last nar	ne first, if in	ndividual)										
Busine N/A	ss or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)							
Name o	of Associated	Broker or l	Dealer										
	in Which Pers				s to Solicit	Purchasers							C

[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)		-	HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	-		1S]	[MO]
[MT]		[NV] [SD]	[HH] [TN]	[NJ] [TX]	[MM] [UT]	[YY] [VT]	[NC] [VA]	[ND] [WA]	[HO]			DR] IY]	[PA] [PR]
	[90]	[30]	[11/]	[IA]	[01]	[1]			[[[]		AA T] [A	4.7.1	
		C. (OFFERING	PRICE, NI	MBER OF	INVESTO	RS. EXPENS	SES AND US	SE OF PR	OCEE	DS		
so th	nter the aggre old. Enter "0' is box and ready exchang	gate offerir if answer	ng price of r is "none"	securities i	ncluded in " If the tr	this offeri	ng and the	total amous	nt already ng, check nange and			Amo	unt Already
	Type of Seco									Offer	ing Price		Sold
	Debt									\$		s	
	Equity									\$	\$500,000	\$	132,834
	Convertible	Securities (Warran		Common varrants)						\$	0*	\$	0*
	Partnership 1												
	Other (Speci												
													132,834
	Total .		r also in Ap					• • • • • • • • • • • • • • • • • • • •		۵	300,000	• • • • • • • • • • • • • • • • • • •	132,034
Form Interpretation I	I shares of that D, none of which see shares of Se enter the numb fering and the e number of archases on the	h has been or ries B Preference of accrete aggregate persons with the pers	exercised. Terred Stock. edited and adollar amount ho have properties.	non-accred ounts of the	ation for the ited investority purchase ecurities a	e warrants ors who ha es. For off nd the agg	is the invest ave purchaserings unde	ors' willingr sed securition or Rule 504	ess to es in this , indicate		Number Investors	Do	Aggregate ollar Amount of Purchases
	Accredited In	nvestors									7	\$	132,834
	Non-accredit	ted Investor	rs									\$	
	Total (for filings u	under Rule :	504 only) .						_		\$	
		Answer	also in App	oendix, Col	umn 4, if f	iling under	ULOE.						
so	this filing is f ld by the issu st sale of secu	er, to date,	, in offering	gs of the ty	pes indicat	ed, in the	twelve (12)) months pr	ior to the			ъ. 1	
	Type of Secu	ırity	Not A	pplicable							Type of Security	Dol	lar Amount Sold
	Rule 505									-	N/A	\$	N/A
	Regulation A	٠		•••••							N/A	\$	N/A
	Rule 504										N/A	\$	N/A
	Total								***************************************		N/A	\$	N/A
se Th	Furnish a securities in this ne information of known, furni	s offering. may be gi	Exclude as iven as subj	mounts related to relate to future to the mounts are not to future to future to the mounts are not to the moun	ating solely re continge	y to organ encies. If tl	ization exp he amount	enses of th	e issuer.				
	Transfer Age	ent's Fees		••••••								\$	
	Printing and	Engraving	Costs					•••••				\$	
	Legal Fees	••••••		•••••			•••••		••••••		☒	\$	5,000

	Accounting Fees				□ \$	
	Engineering Fees		•••••	••••	□ \$ __	
	Sales Commissions (specify finders	' fees separately)			□ \$ __	
	Other Expenses (identify)			••••	□ \$_	
					⊠ \$	5,000
	C. OFFERING P	PRICE, NUMBER OF INVESTORS, EXPE	INSES AND USE OF F	ROCEEDS		
	and total expenses furnished in response	regate offering price given in response to I to Part C - Question 4.a. This difference is	s the "adjusted gross		\$_	127,834
5.		ount for any purpose is not known, furn The total of the payments listed must equ	nish an estimate and			
				Payments to Officers, Directors, & Affiliates	•	Payments To Others
	Salaries and fees		□ \$_		□ \$_	
			□ \$_		□ \$_	
	Purchase, rental or leasing and installation and equipment	ion of machinery	🗆 \$		□ \$	
		gs and facilities				
	offering that may be used in exchange f	ing the value of securities involved in this or the assets or securities of another	П\$	Ni/A	П¢	NI/A
						127.924
	Other (specify):					127,834
		dded)				N/A
		D. FEDERAL SIGNATUR	DE			
sigr	e issuer has duly caused this notice to be s nature constitutes an undertaking by the i information furnished by the issuer to any n	ssuer to furnish to the U.S. Securities at	nd Exchange Commis			
Issı	uer (Print or Type)	Signature \	***************************************	Date	***	
	glish, baby!, Inc.		<u> </u>	May 15, 2003		
	me of Signer (Print or Type)	Title of Signer (Print of Type)				
Joh	n Havden	President				